



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Brian M. Perry
Application No.: 09/546,347 Group: 3625
Filed: April 7, 2000 Examiner: Akers, Geoffrey R.
Confirmation No.: 2092
For: METHOD AND SYSTEM FOR MONITORING A SUPPLY-CHAIN

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
12-22-04	Denise Canedo
Date	Signature
Denise Canedo	
Typed or printed name of person signing certificate	

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

[] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDT. FEE		
TOTAL	73	MINUS	*	60	13	X \$ 25	\$		
INDEP	11	MINUS	**	10	1	X \$100	\$		
<input checked="" type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM									
* not fewer than 20					TOTAL = \$ <u>0</u>		TOTAL = \$ <u>850</u>		
** not fewer than 3					OR				

* not fewer than 20
** not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 850

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Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		TOTAL: \$ <u>0</u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input checked="" type="checkbox"/>	Amendment Fee	\$ <u>850</u>
<input checked="" type="checkbox"/>	Other Fees:	\$ _____
	RCE	\$ <u>790</u>
		\$ _____
		TOTAL: \$ <u>1640</u>

A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By 
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Dated: 12/22/4